PART B - FEE(S) TRANSMITTAL

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DALLAS, TX 7	ſ				(Depositor's name)			
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/766,707	10/766,707 01/28/2004		Jared Floyd 65744/P016US/10316060 3818			3818		
TITLE OF INVENTION IMAGING PROBE	N: METHOD AND SYS	STEM FOR POSITIONE	NG A MEDICAL DE	VICI	E AT ONE OR MORE	ANGLES RELATIV	E TO AN	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	UE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300		\$0	\$1810	09/14/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
MEHTA, PARIKHA SOLANKI		3737	600-461000					
1. Change of correspond: CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-(Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI SONOSITE	less an assignee is ident h in 37 CFR 3.11. Com GNEE e, Inc.	pletion of this form is NO	data will appear on th T a substitute for filing (B) RESIDENCE: (C Bothell,	n the patent. If an assignee is identified below, the document has been filed for ling an assignment. (CITY and STATE OR COUNTRY) , WA				
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):		Individual 🖾 Corporat	ion or other private gr	oup entity Government	
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	s SMALL ENTITY state	us. See 37 CFR 1.27.	* *	_	er claiming SMALL EN			
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Authorized Signature			DateAugus	st 6, 2009				
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